



AN ASSOCIATION OF
MONTANA HEALTH
CARE PROVIDERS

BUSINESS & LABOR

EXHIBIT NO. 4
DATE 2-6-15
BILL NO. HB 147

February 6, 2015

Members of the Senate Business, Labor, and Economics Committee:

Thank you for the opportunity to support the Nurse Licensure Compact (NLC) bill today. Because MHA provides services to thousands of nurses across the state, our member facilities that employ them are very appreciative of your efforts to move this legislation forward.

The NLC was initiated by the National Council of State Boards of Nursing (NCSBN) in 2000. Since then 24 states have joined. Montana is surrounded completely by compact states, except for Wyoming.

Under the compact, nurses who hold a permanent residence in a compact state can be issued a multi-state license, which authorizes them to practice in all other compact states without obtaining a separate license for each one. These nurses must meet Uniform License Requirements that **currently meet or exceed Montana's licensure requirements.**

There are several reasons why MHA members support passing the NLC:

- **It creates a simpler process for nurses to practice in Montana.** A license is obtained for the "home" state, and the nurse can practice in other compact states without going through an extra licensing process. It saves time, hassle, money and duplication of government services. MHA represents more RNs and LPNs in its membership than any other association; when it's easier to find nurses to help, they do not have to bear the burden of working extra shifts or overtime, which can add stress and compromise patient safety. **It also assists military spouses in relocation.**
- **Improved sharing of information on license infractions or criminal behavior.** Compact states share information on licensees through Nursys®, a national database. This way, if any member state takes action on the privilege to practice, the investigative findings are shared. The compact would alert any other states if the nurse tried to apply for a license in a new state, which prevents that process from being completed until the investigation is complete. Employers also have access to the Nursys® database, so they can check it prior to hiring. Most all compact states also require background checks, which Montana is in the process of implementing via HB115.
- **The NLC is a state-based system that is recognized nationally but enforced locally.** All nurses with compact licenses who work in other states must abide by the states' nurse practice act in which they are working. MHA members consistently perform their own criminal background checks and employment histories prior to hiring staff, so they already bear the responsibility for public safety. No health care organization wants

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to jeopardize its relevance to a community because it hires potentially dangerous staff; also, state and federal regulations require the organizations to provide for patient safety.

- **Patients and health care are becoming increasingly mobile.** Nurses in Montana who provide case management, telehealth, or other care coordination activities across state boundaries do not have to acquire a license in every single state if the other states are part of the compact. This saves money, requires fewer government resources, and provides continuity of care. For example, a Nurse Call Center in Missoula can counsel patients in their service area who may live over the border in Idaho or Washington.
- **When Montana nurses are not available, using compact nurses can help prevent lapses in patient care delivery and services.** Addressing staffing needs to ensure safe, continuous patient care is made easier, especially if these needs are unanticipated such as staff emergencies, local or regional disaster events, inability to immediately replace a vacancy, etc. **The NLC is not intended to be a long-term solution** for our nursing shortage; that issue is being addressed with other statewide workforce development efforts.
- **No compact states have had to raise licensing fees because of adopting the compact.** In 2012, the NLC Administrator performed a survey of compact states regarding fiscal impact to their states. Nineteen of 24 states responded; 89% felt that being a member of the NLC has not had a significant enduring negative impact on their budget.
- **In a 2012 Robert Wood Johnson Foundation study on Disaster Preparedness, Montana received a 3 out of a possible 10.** One of the 10 indicators where we failed is *lack of participation in the licensure compact*. The ability to work across state lines can be a tremendous benefit during disaster or disease outbreaks. It helps allow for continuity and access to care, enhancing patient safety.
- **Montana is already a part of 25 different state compacts (such as drivers' licenses).** Clearly, state authority or sovereignty is not at risk because of the ability to locally enforce activities to address the actions of a nurse. Also, each compact state has a representative at the compact administrator's table.
- **Compact nurses provide care that is safe in any state.** Please see the accompanying document on reduction of patient harm in compact states.

Thank you for your consideration of this important issue. Please help us maintain an accessible, safe, qualified nursing workforce in Montana; our residents and patients depend on us!

Respectfully submitted,

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Organizations Supporting the NLC

- Air & Surface Transport Nurses Association
- American Academy of Ambulatory Care Nursing
- American Association of Colleges of Nursing
- American Association of Occupational Health Nurses (AAOHN)
- American Association of Poison Control Centers
- American Organization of Nurse Executives (AONE)
- American Nephrology Nurses Association (ANNA)
- American Telemedicine Association (ATA)
- Association for Vascular Access
- Association of Camp Nurses (ACN)
- Case Management Leadership Coalition (CMLC)
- Case Management Society of America (CMSA)
- Case Management Society of America, New England Chapter
- Case Management Society of Atlanta
- Case Management Society of Chicago
- Case Management Society of St. Louis
- Center for Telehealth and E-Health Law
- Citizen Advocacy Center (CAC)
- Commission for Case Manager Certification
- Emergency Nurses Association (ENA)
- National Military Family Association
- Population Health Alliance
- State Alliance for e-Health of the National Governors Association Center for Best Practices
- Telehealth Leadership Council
- U.S. Department of Commerce

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